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84654	7590 07/09	0/2009	have	have its own certificate of mailing or transmission.				
LSI CORPORAT 2026 CARIBOU	EUND & YOUN	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					d le	
SUITE 201 FORT COLLINS	CO 90525		(Depositor's name)					
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APPLICATION NO.	FILING DATE	FIRST NAMED INVEN			ATTORNEY DOCKET NO		CONFIRMATION NO.	7
10/817,419 04/01/2004			Judy M. Gehman	LSI.165US01 (03-2477		1 (03-2477)	1307	J
TITLE OF INVENTION CIRCUIT DESIGN	I: SYSTEM AND ME	THOD FOR IMPLEME	NTING MULTIPLE INST	CANTIATED CONI	FIGURABLE	E PERIPHERA	ALS IN A	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	E FEE TOTAL FEE(S) D		DATE DUE]
nonprovisional	NO	\$1510	\$300	\$0	\$1810		10/09/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
VIDWAN, JASJIT S		2182	710-008000	•				
 Change of corresponde CFR 1.363). Change of correspondent 		For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 COCHRAN FREUND & YOUNG					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	ne)				-
PLEASE NOTE: Unle recordation as set forth	ess an assignee is ident in 37 CFR 3.11. Com	ified below, no assignee	data will appear on the pa of a substitute for filing an a	atent. If an assigned	e is identified	d below, the d	ocument has been filed fo	r
(A) NAME OF ASSIC		(B) RESIDENCE: (CITY and STATE OR COUNTRY)						
LSI COR	PORATION	1621 Barber Lane, MS D-105 Milpitas, CA 95035						
Please check the appropri	ate assignee category or	categories (will not be p	rinted on the patent):	•		ther private gro	oup entity Government	t
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5. Change in Entity Stat	us (from status indicate	d above)	overpayment, to Bopo.	sit recount rumoer	20-143.	(chelose a	in extra copy of this form).	-
a. Applicant claims	SMALL ENTITY state	is. See 37 CFR 1.27.	☐ b. Applicant is no long	ger claiming SMAL	L ENTITY st	atus. See 37 Cl	FR 1.27(g)(2).	
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